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ABSTRACT

This study sought to clarify the appropriate content of a policy and procedures manual for college health services at Rancho Santiago College (RSC) and to involve the health services staff in developing such a manual. RSC is a large urban Southern California comprehensive community college. The study proceeded with a literature review, a modified Delphi technique for data collection, and a panel of judges for formative and summative evaluation during product development. The panel members were selected from the RSC health services staff in order to promote staff participation. The objectives of the study were met in the following ways: (1) panel members were able to identify what policies and procedures were needed by health services staff members to establish standards and uniformity in performance of role expectations and responsibilities; (2) the design of the study provided staff participation which resulted in a sense of ownership in the product; (3) the study increased staff awareness of the need for a departmental policy and procedures manual; (4) the study facilitated staff interest and motivation in the formation of the manual; and (5) the final table of contents developed included the identified policies and procedures that the staff felt were needed. The table of contents itself is appended. Includes 35 references. (JB)

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DEVELOPMENT OF THE CONTENTS OF A COLLEGE HEALTH SERVICES POLICY AND PROCEDURE MANUAL

Politics, Law, and Economics Seminar

by

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A Practicum Report presented to Nova University in partial fulfillment of the requirements for the degree of Doctor of Education

Nova University

January, 1992

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Sheila G. Rockoff

January, 1992

A departmental policy and procedure manual can promote increased confidence in problem-solving and decision making for staff. A well designed manual delineates expected courses of action, clinical practice, and responsibilities. It can provide for legal protection, by reducing the risk of professional liability, through clearly identified performance standards and expectations. Policies and procedures promote consistency and uniformity in the provision of health care, especially for routine and re-occurring situations. The anticipated outcome of a departmental policy and procedure manual is improvement in staff efficiency and effectiveness.

The two Health and Wellness Centers within the Rancho Santiago Community College District did not have a policy and procedure manual. The district, known as Rancho Santiago College (RSC), is a large comprehensive community college with a Fall 1991 enrollment of 43,000 students.

Located in a large urban area of central Orange County of Southern California, RSC is comprised of two campuses and three continuing education non-credit centers. The district has a single college, multi-campus organizational and governance structure.

The purpose of this study was the development of a valid product. The product was the table of contents for a policy and procedure manual for health services at RSC. The research questions asked: What is the appropriate content of a policy and procedure manual for college health services at Rancho Santiago College?

The design of this study employed a literature review, a modified Delphi technique for data collection, and a panel of judges for formative and summative evaluation during product development. The panel members were selected from the RSC health services staff in order to promote staff participation and collaboration in the development of the product.

The outcome of this study answered the research question and produced a realistic, useable product. Recommendations included the dissemination of the study to all health services staff, and implementation of the product to develop a policy and procedure manual for health services at RSC.

TABLE OF CONTENTS

Chapter		Page
1.	INTRODUCTION	1
	Background and Significance	1
	Research Question	4
	Objectives	4
2.	LITERATURE REVIEW	5
	Policies and Procedures	5
	Policy and Procedure Manuals	8
	Relationship to Nursing	11
	Summary	14
3.	METHODOLOGY AND PROCEDURES	16
	Design	16
	Assumptions	20
	Limitations	21
4.	RESULTS	22
5.	DISCUSSION, CONCLUSIONS, IMPLICATIONS, AND RECOMMENDATIONS	26
	Discussion	26
	Conclusions	29
	Implications	30
	Recommendations	31
REFERENCES		33
APPENDIX		36

Chapter 1

INTRODUCTION

Background and Significance

A college health service policy and procedure manual can provide staff with a guide for problem-solving and decision making. Rancho Santiago College recently expanded its college health services, with the opening of a second Health and Wellness Center, at a second campus. Health services lacks a policy and procedure manual to guide the decisions and actions of the nurses and clerks staffing the two Health and Wellness Centers. A policy and procedure manual for college health services is essential to maintain consistency of performance standards and expectations, and to provide the staff with guidance and direction in their judgements and decision-making in carrying out their roles and responsibilities.

This study determined the essential contents required of a college health services policy and procedure manual. The purpose of this study was the development of a table of contents for a college health service policy and procedure manual to guide and direct the actions and decisions of the staff.

Rancho Santiago College (RSC) is a comprehensive community college, located in a large urban area of central

Orange County in Southern California, characterized by a significant cultural and socioeconomic diversity.

The Rancho Santiago Community College District is comprised of two campuses and three continuing education non-credit centers, with a total district enrollment of over 43,000 students. The district has a single college, multi-campus organizational and governance structure, and is known as Rancho Santiago College (RSC). The larger campus is the Santa Ana Campus, with a Fall 1991 enrollment of over 25,000 students. The newer Orange Campus had a Fall 1991 enrollment of 7,500 students (RSC, 1991).

RSC health services is comprised of two Health and Wellness Centers, one at each campus. Under the single college, multi-campus structure, a single program manager is responsible for both of the Health and Wellness Centers. Health services has one fulltime administrative clerk and one fulltime registered nurse (in addition to the program manager), with twenty-three parttime staff comprised of clerks, nurses, physicians, and psychologists. The recent expansion of health services, with the opening of a Health and Wellness Center at the new Orange Campus, has resulted in the need for written policies and procedures. A policy and procedure manual could potentially enhance performance, efficiency, and effectiveness of college health services, including the quality of health services provided and delivered to students. In addition, a policy and procedure

manual could provide for the standardization of procedures, with legal accountability for nursing practice, within college health services. A policy and procedure manual also has the potential to provide cost effectiveness in the use of staff time to problem-solve and make decisions. The RSC Health and Wellness Centers must consider time-efficiency and cost-effectiveness in providing services to students.

A policy and procedure manual for college health services correlates with the legal implications and economic issues as related to the Politics, Law, and Economics Seminar. Policy and procedure manuals provide definitive staff performance expectations and guidelines for roles and responsibilities. Such a manual, according to Nardecchia and Myers (1980) and Wolper and Pena (1987), is necessary for the maintenance of consistent practices for cost-efficiency and effectiveness in providing health care. A manual delineating policies and procedures provides a basis for legal protection by identifying legal accountability and standards of performance expectations (Nardecchia and Myers, 1980).

This study used a developmental problem-solving methodology to determine what contents should be included in a college health services policy and procedure manual. The product of this study was a table of contents identifying the policies and procedures that should be included in such a manual.

Research Question

The research question: What is the appropriate content of a policy and procedure manual for college health services at Rancho Santiago College?

Objectives

The objectives of this product developmental study were:

1. To identify what policies and procedures are needed by RSC health services staff to establish standards and uniformity for role performance.

2. To provide staff participation in identifying what policies and procedures are needed within the department.

3. To increase staff awareness and comprehension of the purpose and need for a departmental policy and procedure manual.

4. To facilitate staff interest and motivation in participatory collaboration in the formation of a departmental policy and procedure manual.

5. To develop a listing, in the form of a table of contents, of identified needed departmental policies and procedures.

Chapter 2

LITERATURE REVIEW

Policies and Procedures

The establishment of policies and procedures is a management responsibility. Written policies and procedures guide the action and performance of staff (Sergiovanni, 1984; and Schultz and Johnson, 1990), provide control that is essential to establish standards, and promote efficient and effective departmental operations (Scheyer, 1985; Vose, 1990; and Wolotkiewicz, 1980). Policies and procedures are departmental statements of awareness of practice standards and performance expectations (Rubenstein, 1986). Although there is a similarity and overlapping between policies and procedures, they perform different functions and have different purposes.

A policy is a statement of principles or guidelines to action and behavior. According to Schultz and Johnson (1990), a policy is the how, when, and where the action will be completed, as it is a guide to action and behavior expected of staff. Viewed as guidelines for action, policies provide a framework for making decisions, define desirable and undesirable behaviors, define standards, and guide activities of staff in the performance of their responsibilities (Gardner, et al., 1990; Hardy and McWhorter, 1988; and Mark and Smith, 1987). A policy,

according to Swansburg (1990), establishes boundaries for action and sets a course to be followed. Policies are closely related to departmental philosophy, objectives, operational plans, established standards, and are a source of guidance for staff members.

Policies provide guidelines that define the scope of authority and responsibility of staff (Scheyer, 1985), and delineate situations in which decisions will be made and the subsequent expected action to be taken (Liebler, et al., 1984). Written policies communicate common values, and bring a consistency and continuity to decisions that are made by staff, which influence their action and behavior (Haimann, 1989; Mark and Smith, 1987; Sergiovanni, 1984; and Wolotkiewicz, 1980). As guides to thinking and decision making, policies facilitate uniformity and consistency for repetitive, routine time-consuming problem-solving that necessitates decision-making by staff (Haimann, 1989; and Sergiovanni, 1984). Policies provide guidelines for thinking, requisite to making a decision, which address concerns or resolve a problem, making actions and behaviors more predictable (Hardy and McWhorter, 1988; and Mark and Smith, 1987).

Swansburg (1990), describes policies as the rules that promote consistency in guiding decision making and action. Creighton (1987a), states policies can promote increased confidence in decision making and the development of

appropriate judgments for staff. Policies also establish performance standards and expectations of staff (Creighton, 1987b; Nardecchia and Myers, 1980), especially for situations that occur repetitively.

Unlike policies, which are general statements used to solve anticipated problems by guiding thinking and behavior in making problem-solving decision, procedures guide actions by delineating the concrete instructions and specific steps necessary to carry out tasks. Procedures provide a detailed set of directions for performing a sequence of actions that occur often and regularly. They ensure consistency and uniformity of action, with predictable outcomes and standardization. Procedures are detailed instructional steps that specify what can be done in a given situation or circumstance, and identify the manner in which tasks should be accomplished (Haimann, 1989; Liebler, et al., 1984; Scheyer, 1985; Sergiovanni, 1984; and Swansburg, 1990).

Procedures are necessary for recurring, repetitive work in order to ensure uniformity and consistency in the performance of routine tasks and activities (Liebler, et al., 1984; and Scheyer, 1985). As written protocols, procedures are a sequence of steps to be followed by staff in carrying out their responsibilities, which enable staff to perform a particular task with efficiency and accuracy (Griffith and Ignatavicius, 1984; and Rebore, 1991).

Procedures are used by program managers to communicate, inform, teach, and reduce errors of staff. They facilitate delegation of authority, lead to more efficient methods of operations and control, aid in coordination of activities, and foster economizing of staff time, with improved efficiency and effectiveness (Swansburg, 1990).

Policy and Procedure Manuals

The initial step in planning to develop policies and procedures is to determine their intended purpose. Policies and procedures are most commonly written to train or orient new employees, to bring about uniformity of behavior among employees, as a reference for when unexpected problems arise, and to explain to staff why certain actions are to be undertaken. The best method for dissemination of written policies and procedures is in the form of a manual (Gardner, et al, 1990; Rebore, 1991; Rowland and Rowland, 1985; Rubenstein, 1986; and Schultz and Johnson, 1990).

Policies should be stated in simple, clear, concise language, and be easy to understand. Statements should allow for flexibility and not be overly restrictive, but provide room for judgment when necessary. Wording should be in positive, rather than negative terms, and should reflect an identifiable and consist pattern (Haimann, 1989; Rowland and Rowland, 1985; Sergiovanni, 1984; and Wolotkiewicz, 1980).

Policies that are useful and effective, according to Lieber, et al. (1984) and Haimann (1989), permit flexibility and interpretation by using such wording as whenever feasible, whenever possible, as circumstances permit, and under certain or unusual circumstances. They must be written to accommodate changing conditions and should specify actions to take, actions to be avoided, indicate when and how to respond, and permit action based on the situation and circumstances (Lieber, et al, 1984).

The purpose of a procedure manual is to provide a resource for employees that describes the steps to follow to carry out a routine or repetitive tasks, and delineate protocol instructions for performing procedures (Rubenstein, 1986). Procedures should be written in broad, general terms that allow for interpretation and implementation. Using a consistent format provides for ease of use and comprehension. Procedural steps should include action verbs and should follow a logical sequence with definitions, illustrations, and examples, to clarify instructions and improve comprehension. Include essential information pertaining to tasks and situations that are likely to occur repeatedly. Identify its purpose, the rationale for performing the task, under what circumstances it must be done, and who (by title) is to do it. Arrange steps in a logical sequence with identification of who, what, when, where and how of the action. (Gardner, et al., 1990;

Griffiths and Ignatavicius, 1984; Haimann, 1989; Liebler, et al., 1984; Rebore, 1991; Rubenstein, 1986; and Scheyer, 1985).

Policies and procedures should be as few in number as is necessary in order to guide thinking and behavior of staff, without restricting their judgment (Gardner, et al., 1990; and Wolotkiewicz, 1980). Each entry should be selected for its proactive guide to action and decision making (Haimann, 1989; Rowland and Rowland, 1985; and Vose, 1990).

A policy and procedure manual must be organized and planned for ease of use by arranging either in alphabetical order or organized by subjects, with an index and cross-reference (Bulau, 1990; and Rowland and Rowland, 1985). According to Patterson, et al. (1986), the physical format should be in a convenient size, easy to read, and follow a logical sequencing of steps.

It is recommended that a three-ring binder be used to facilitate removal of modified and abandoned policies and procedures, with the replacement of revised or new ones. Policies and procedures should be reviewed and revised annually for currency, relevancy, and applicability (Haimann, 1989; and Rubenstein, 1986).

When developing policies and procedures a participative approach fosters employee understanding. As stake holders in the formulation, staff participation facilitates ideas,

compliance, willingness to support and implement the policies and procedures that govern their decision making and behavior (Barnum and Mallard, 1989; Schultz and Johnson, 1990; and Wolotkiewicz, 1980).

Relationship to Nursing

Policies and procedures are nursing management tools that guide the provision of nursing care and reflect the expected standards of performance. They define and describe the scope of practice and conduct expected of nurses in the provision of nursing care by delineating a course of action, and guiding problem-solving and decision making. Policies and procedures form the expected practice standards that direct and guide nurse actions within a given department or service. Such standards are the legal role and responsibilities inherent in the practice of nursing, and the delivery of care. Nurses are legally accountable to meet minimum standards of performance. (Lieber, et al., 1984; Northrop and Kelly, 1987; and Patterson, et al., 1986).

Standards identify acceptable and expected behavior, and are established by a recognized authority. Nursing standards of care act as guidelines for effective nursing practice, and define what should be done, identify conditions and situation under which nursing care is to be given, and delineate the acceptable level of care considered minimal for a specific purpose or situation. (Goldstein, et

al., 1989; Patterson, et al., 1986; and Rocereto and Maleski, 1982).

The legal standards for nursing practice are within the scope of nursing licensure boards and the legislative bodies of each state. These mandated standards are the starting point for establishing guidelines for effective nursing practice, and the delivery of care. Further responsibility lies within the role and authority functions of nurse managers to identify and establish departmental policies, procedures, and standards of performance. Policies and procedures delineate the specific expected standard of performance, above and beyond those imposed by legislative bodies, for which the nurse is held accountable to perform for each nurse action (Goldstein, et al., 1989; Leiber, et al., 1984; Patterson, et al., 1986; and Rocereto and Maleski, 1982). Standards define what behavior and actions are acceptable, and guide judgments and problem-solving decision making by staff nurses (Haimann, 1989; Northrup and Kelly, 1987; and Tappen, 1986).

Nurse managers, according to Dieneman (1990), Northrup and Kelly (1987), and Patterson, et al. (1986), are legally accountability and responsible for the delivery and quality of care given by staff nurses. Policies and procedures are proactive statements and guidelines that direct the action of staff, and provide for standardization in resolving problems and decision making (by guiding thinking and

judgments) for repetitive and frequently occurring situations. As nurse managers are accountable and responsible for establishing, monitoring, and evaluating the quality and appropriateness of departmental practice standards, the most appropriate vehicle to ensure that standards of nursing practice are carried out is through a policy and procedure manual (Wolper and Pena, 1987). This manual can communicate performance expectations and standards of nursing practice to staff within a given department or service.

As policies help staff to think about their decisions, and procedures are the guides to decisive behavior (action), policies and procedures should be limited. They should address situations for which it is critical to maintain standardized performance among staff. This can ensure that situations which occur repeatedly are handled in the same manner by all staff. (Bulau, 1990; Leibler, et al., 1984; and Sergiovanni, 1984).

A well organized and well written policy and procedure manual can enhance staff performance, with a resultant benefit of increasing staff effectiveness and efficiency. Nurses spend a tremendous amount of time in problem-solving, and formulating a plan of action, based on their judgments. Such decision making processes require time. Recognizing the rapidly escalating costs of providing health services, and the necessity of cost-containment, nurse managers must

conceptualize methods to cut unnecessary expenditures through planned and practical use of personnel time to maximize productivity and performance (Barnum and Mallard, 1989; Mark and Smith, 1987; and Swansburg, et al., 1988).

Productivity, according to Barnum and Mallard (1989), can be quantified as a ratio between input and output. In nursing, input can be measured in personnel hours and output described as a measurement of the product - the services and care rendered to a patient. Personnel costs can be reduced by the amount of time nurses spend on repetitive actions that require problem-solving decision making, in order to determine what actions to implement. Simultaneously, the performance efficiency and effectiveness of staff can be enhanced (Barnum and Mallard, 1989; Mark and Smith, 1987; Swansburg, 1990; and Wolper and Pena, 1987).

Summary

A policy and procedure manual can promote increased confidence in decision-making and the development of appropriate judgments for staff members. A manual that is well-integrated and designed can delineate expected courses of actions, clinical practice, roles, and responsibilities. In addition, according to Creighton (1987a), a policy manual can provide for legal protection by reducing the risk of professional liability, through clearly identified performance standards and expectations.

Essential information, which is necessary to promote and control continuity, consistency, uniformity, and excellence, in the provision and delivery of health care can be provided in a policy and procedure manual. In such a manual, standards are identified and procedures established that guide nursing practice, decisions, and actions (Creighton, 1987b; Steel, 1982).

A policy and procedure manual, according to Creighton (1987a), tells nurses how to proceed and how to perform a task, based on an established and identified standard of performance. It provides nurses with a reference for performance expectations and guidelines for decision-making (Nardecchia and Myers, 1980). This can potentially save nurses time, with resultant increased efficiency and effectiveness in the delivery of services.

Clearly written policies and procedures become rules and regulations that promote consistency to guide decisions. They also enforce legal rules and regulations, and set standards of care and performance expectations. Policies and procedures outline a standard or method for performing duties and tasks, and serve as a guide for action (Swansburg, 1990). They delineate the who, the what, the where, the why, and the how, to perform a task or procedure, and describe what can or cannot be done under specified circumstances. The anticipated outcome is improvement in departmental efficiency and effectiveness.

Chapter 3

METHODOLOGY AND PROCEDURES

Design

This study used a developmental problem-solving methodology to develop a content listing for a college health services policy and procedure manual. A development problem-solving methodology is used in situations where the solution to a problem is a product (Grizzle, 1990; Rankin, 1990; and Robinson and Woolf, 1991). In this study the problem was the lack of a policy and procedure manual for health services. The product of this study was the development of a table of contents listing for a policy and procedure manual for health services at RSC.

A knowledge base of the nature and content of policy and procedure manuals was established from a review of the literature, in order to determine what constitutes a policy and procedure manual. This included the legal implications and economic value of a policy and procedure manual, and the how and the what of developing a policy and procedure manual for college health services. Subsequent to this review of the literature, the procedures for identifying the appropriate content of a college health services policy and procedure manual was formulated. This included developing a preliminary content listing and selection of the panel of judges.

The literature encourages the involvement of staff members in the planning and developing of departmental policies and procedures. Staff participation can provide valuable input vital to the success of the product developed, by promoting their acceptance and compliance of the product developed. As stake-holders in the development of the product, staff become motivated to participate and become active supporters during the implementation process. Therefore, the panel of judges for this study was chosen from among the internal departmental staff members, as opposed to selection external to the department or the institution.

The staff members selected to be members of the panel of judges were chosen based on their employment status, position, seniority, and knowledge of the RSC health services operations, including the historical precedents of (non-written) policies and procedures. An additional criteria was their representation from both of the Health and Wellness Centers, and their informal leadership roles within the department.

A total of seven health services staff members were selected for the panel. Four of the nurses were chosen - the only fulltime nurse, and three of the parttime nurses. Of the three parttime nurses, they each worked at both Health and Wellness Centers, providing representation from each Center. The three clerical staff members asked to be

on the panel were chosen based upon the same criteria as the nurses. They included the one fulltime administrative clerk, who supervises the clerks, and two parttime clerks, representing each Health and Wellness Center. These health services staff members were selectively chosen to represent the total compliment of twenty-five health services staff. They had the most expert knowledge of RSC health services, and the ability to identify departmental needs, acting as expert judges.

The task for this panel of seven was to identify the policies and procedures needed within the Health and Wellness Centers. A small number of panel members were selected in order to foster consistent participation throughout the data collection, which was conducted over a period of six weeks. The objective was for them to give input into the formative development of a table of contents listing for a departmental policy and procedure manual, and to give a summative evaluation in order to validate the final product developed.

To foster participation and staff collaboration in this study, a modified Delphi technique was chosen for data collection. The Delphi technique is a useful data collection method for determining priorities and to quantify expert judgments. Participants are asked to participate and complete a series of questionnaires. The responses are collected, and the results summarized and returned to the

participants. After each evaluative review, the panel members may change their previous responses. This process is repeated several times, until the resulting data is a consensus of the panel (Isaac and Michaels, 1981; and Treece and Treece, 1987).

A modified Delphi technique was utilized for data collection and the formative evaluation of this study in order to plan a course of action, find consensus, and attempt to predict needs. The advantages of using this technique are the minimal time demands on the panel, the ability to conduct a study without meetings, and the ease of obtaining represented general consensus (Treece and Treece, 1987). As it was not feasible to convene meetings of the panel, this method of data collection and participative formulation of the product develop was most realistic and workable. Using the modified Delphi technique provided the vehicle for using written communications. Memo's were employed to communicate with, and obtain input from, panel members. A series of three questionnaire lists were disseminated, over a period of six weeks. These series of lists permitted data collection, and acted as the formative evaluation of this study, and the resultant product that was developed.

In the modified Delphi technique, the group (panel) is presented with an established listing and asked to rate the items (Isaac and Michaels, 1981). The first memo identified

the purpose and intent, and asked for their participation in the development of a table of contents for a departmental policy and procedure manual. This first review also included a preliminary listing as a starting point for this study.

Subsequent to this first review, the panel responses were compiled and summarized. These results were then assembled into a revised content listing and sent, via a memo, to the panel members for a second review. Following this second review by the panel members, their suggested modifications were made, and a revised table of contents listing was compiled. This third and final revision of the listing was submitted (Appendix), via memo, to the panel members for their review and approval.

The procedure for validating the final product was accomplished by asking the panel members, acting as judges, to evaluate the final listing of topics (table of contents). As a summative evaluation, the third review by the panel of judges determined the finalized table of contents, and the product of this developmental study.

Assumptions

In this study, the assumption was made that the panel of judges would give a reliable and valid evaluation of the product. Staff, according to Nardecchia and Myers (1980), who have a stake in the development and ownership of a

product, are motivated to participate in the product developed.

Limitations

A limitation of this study was the imperfect validity of the criteria established to identify what should be included in a college health services policy and procedure manual. An additional limitation was the inability to generalize the product to other settings.

Chapter 4

RESULTS

This developmental study was designed to produce a product to solve a problem for the RSC Health and Wellness Centers. The problem was the lack of a policy and procedure manual for health services. Recent expansion of health services, with the opening of a second Health and Wellness Center at a second campus, has resulted in the need for written policies and procedures. Both Health and wellness Centers are under the same program manager, and some staff members work at both Centers. This has resulted in the need to develop written policies and procedures to guide the problem-solving decision making process of staff, as well as to establish uniform performance standards and expectations. Consequently, the need for a health services departmental policy and procedure manual was identified by the program manager.

The purpose of this developmental study was to develop a listing for a policy and procedure manual, in the form of a table of contents. It was anticipated that this table of contents, as the product of this study, would be the initial planning for the subsequent development of a health services policy and procedure manual at RSC.

The research question asked: What is the appropriate content of a policy and procedure manual for college health

services at Rancho Santiago College? The methodology used to answer this question was a review of the literature, selection of a panel of judges, and use of a modified Delphi technique for data collection. The product produced as an outcome of this study was a table of contents listing for a health services policy and procedure manual at RSC.

This developmental study began with a review of the literature. The literature revealed consistent emphasis on the necessity and importance of a policy and procedure manual to give direction and guidance to the decisions and actions of staff. Also stressed in the literature was that policies and procedures provide legal compliance and establish expected standards for the practice of nursing. The legal implications and legislative state mandates, which regulate the practice of nursing, are reinforced through specific departmental policies and procedures.

As many situations tend to be repetitive, and occur frequently, policies and procedures can reduce the amount of time staff members spend on problem-solving and decision making. Therefore, a policy and procedure's manual can enhance time efficiency, through the conservation in the use of staff time for repetitive activities, with resultant cost-efficiency and program effectiveness in providing care.

The literature emphasized that policies and procedures provide guidelines for performance expectations and role responsibilities of staff. Policies set standards and

performance expectations, by guiding thinking and decision making. Procedures delineate the sequential steps requisite to carrying out a decision or an action. Having written policies and procedures fosters consistency within a department or service by setting performance standards and expectations. The anticipated outcome is improvement in departmental efficiency and effectiveness, with economic benefits and legal implications.

As suggested in the literature, the panel of judges for this study was selected from among the RSC health services staff. This provided for staff participation and collaboration into the formation of the product developed.

The first listing presented to the panel members was organized into four main sections, and had general tasks and items listed as subcategories to each of these main sections. No numbering or outline system was used. All selected panel members participated by returning this first list with their suggestions and comments, which included additions to the items listed, and recommendations as to the organization and format of the product. Responses and input included suggestions for altering the main sections into main headings, with titles and labeling as parts (ie: Part One, Part Two, etc.), and adding a fifth part. Also suggested was using an outline format, and the addition of tasks and sub-categories of tasks and routines. This first listing primarily emphasized nursing tasks,

responsibilities, and routine laboratory procedures. The panel felt it was necessary to expand the clerical section by adding additional clerical duties and procedures in order to delineate clerical responsibilities, including the use of the computer and accountability for the various departmental forms.

These suggestions and recommendations were compiled into a revised listing, and given to the panel members for a second review and their comments. The panel members responses to this second review included further recommendations as to the format and organization of the product. It was suggested that the listing be alphabetized and a numeric numbering system be used, as opposed to a combined alpha and numeric outline numbering. All panel members agreed on the items listed, and no additions were suggested. These formative suggestions were incorporated into a third revision of the product. Input from the panel members on this second review led to the revision and refinement of the final product.

The summative evaluation and validation of the finalized product was conducted by having the panel members judge its contents, organization, and format. Consensus and agreement was reached, with all panel members accepting the final product in both substance and format (Appendix).

Chapter 5

DISCUSSION, CONCLUSIONS, IMPLICATIONS, AND RECOMMENDATIONS

Discussion

The purpose of this study was to develop a product, in the form of a table of contents listing, for a health services policy and procedure manual at RSC. The intent was for this listing to become the initial phase of actually developing specific written policies and procedures. The design of this study was based on the literature, which supports input and active participation of staff. The participation of RSC staff members, as discussed in the literature, did enhance their interest and motivation in the product development and its potential utilization within the department.

As discussed by Barnum and Mallard (1989), Schultz and Johnson (1990), and Wolotkiewicz (1980), staff who become stake holders offer ideas, support the project, comply with expectations, and willingly implement the policies and procedures that govern their actions and behavior. The design of this study permitted the staff, who were selected as panel members, to feel ownership in the product. They offered valuable input and suggestions during formation of the product. Comments received included such statements as "we really need this", "I'm glad to be able to offer my

suggestions", "thanks for asking me", "I'm glad I was asked for my input", "this is great - we need a manual", and "this will sure help us when you're not here". By having staff collaboration, they felt vital to the development of this product, and were motivated to participate. The implementation of the design of this study was successful, and supported the discussion presented in the literature on staff involvement and participation.

As cited by Gardner, et al. (1990), Haimann (1987), Hardy and McWhorter (1988), Scheyer (1985), and Swansburg (1990), a policy and procedure manual provides staff members with a guide for problem-solving and decision making for repetitive situations. A policy and procedure manual delineates responsibilities and provides for legal parameters, by identifying expected performance standards. As discussed by Barnum and Mallard (1989), Creighton (1987b), Mark and Smith (1987), and Swansburg (1990), such a manual can reduce the time staff spend on repetitive situations that require problem-solving and decision making. This in turn leads to increased departmental efficiency and effectiveness. An additional consideration is, as discussed by Northrup and Kelly (1987) and Patterson, et al. (1986), the legal implications that support and enhance state legislative mandates, which are inherent in the practice of nursing.

The outcome of this study was a realistic, useable product. The research question was answered by the product developed, and RSC health services now has a valid listing, in the form of a table of contents, for a departmental policy and procedure manual.

The objectives of this study were successfully met.

Objective 1:

The panel members were able to identify what policies and procedures were needed by RSC health services staff members to establish standards and uniformity in performance of role expectations and responsibilities. The product developed includes routine tasks and duties that are expected, and situations that require problem-solving and decision making for action.

Objective 2:

The design of this study, by selecting staff as panel members, provided for staff participation in the identification of the departmental policies and procedures that were needed. The panel members created and developed the product of this study, resulting in their sense of ownership. It is their product and they identified what they, as staff, needed that would benefit the entire department.

Objective 3:

This study did increase staff awareness of the need for a departmental policy and procedure manual. As a result of

this study, staff comprehend the purpose and necessity of such a manual to standardize departmental operations and staff expectations. They understand how such a resource manual will benefit all staff members, and will increase departmental efficiency and staff effectiveness in the performance of their duties and responsibilities. They understand how it will assist them in problem-solving, making decisions, and guide their actions.

Objective 4:

This study did facilitate staff interest and motivation in the formation of what should be included in a departmental policy and procedure manual. They actively participated, and as stake-holders, felt ownership in the product developed. This was a positive outcome, and direct benefit of the design and plan for this study.

Objective 5:

The final product developed, a table of contents for a departmental policy and procedure manual, included the identified policies and procedures that the staff felt were needed. The product developed was the outcome of this study, with the stated purpose and objectives having been met.

Conclusions

The purpose of this study was to determine the guidelines necessary for the development of a policy and procedure manual for health services at RSC. The design

followed suggestions found in the literature, and was successful. The process implemented proved viable, and produced a valid product that was developed from collaborative staff participation.

An additional outcome of this study was staff awareness and understanding of the need for a departmental policy and procedure manual, as well as their interest and motivation to participate in identifying needed policies and procedures. The success of this study was dependent upon staff acceptance and support. This study was able to accomplish this, and successfully met its intended purpose and objectives.

Implications

The implication of the outcome of this study was the development of a realistic, useable, and valid product developed by staff, for staff. The product, a table of contents listing for a departmental policy and procedure manual, will become the guidelines and framework for the subsequent writing and development of specific departmental policies and procedures. As discussed in the literature by Haimann (1989), Rowland and Rowland (1985), Sergiovanni (1984), and Wolotkiewicz (1980), the initial step in planning to develop a policy and procedure manual is to determine its purpose. The purpose and objectives of the product developed, as a result of this study, were accomplished.

Additional implications of the outcome of this study are that the mechanisms are now in place to begin the process of developing the specific policies and procedures identified in the product of this study. Staff participation is essential to the success of such a task, and this study began the process that will facilitate the development of a policy and procedure manual. Consequently, departmental efficiency and effectiveness can be increased, with a reduction in staff time spent in deciding the how, what, and when of carrying out their duties and responsibilities, and performance expectations.

Recommendations

This developmental study was the initial phase in a bigger project. It is recommended that the product developed in this study be used to implement the development of an RSC health services policy and procedure manual.

It is recommended that:

1. This study be disseminated to all RSC health services staff members. This will provide for their awareness and comprehension of the need to develop a departmental policy and procedure manual.

2. Small group sessions be conducted to obtain staff feedback on how best to proceed with the implementation process of writing and developing the specific policies and procedures identified in the product of this study.

3. Staff participation in the planning process be facilitated through appropriate verbal and written communication.

4. Staff collaboration in the writing of specific policies and procedures be obtained, through the formation of small groups of staff to write the policies and procedures identified as needed in the product of this study.

5. The literature review of this study be utilized, to serve as a guide for the development, content, organization and format of written departmental policies and procedures.

6. All health services staff members be included in all decisions, throughout the process of developing the departmental policy and procedure manual, to encourage and facilitate their participation.

REFERENCES

Barnum, Barbara Stevens and Catherine O. Mallard. Essentials of Nursing Management: Concepts and Context of Practice. Rockville, MD: Aspen Systems Corporation, 1989.

Bulau, Judith M. Quality Assurance Policies and Procedures for Ambulatory Health Care. Rockville, MD: Aspen Systems Corporation, 1990.

Creighton, Helen. "Legal Implications of Policy and Procedure Manual - Part I". Nursing Management, 18:22-28. April, 1987a.

Creighton, Helen. "Legal Implications of Policy and Procedure Manual - Part II". Nursing Management, 18:16-18. May, 1987b.

Dienemann, Jacqueline A. Nursing Administration: Strategic Perspectives and Application. Norwalk, Connecticut: Appleton and Lange, 1990.

Gardner, Judith F., Howard L. Smith, and Neill F. Piland. Nursing Management: Power and Responsibility in a New Era. Rockville, MD: Aspen Systems Corporation, 1990.

Goldstein, Arnold S., Sue Perdew, and Susan S. Prvitt. The Nurse's Legal Advisor: Your Guide to Legally Safe Practice. Philadelphia: J.B. Lippincott Company, 1989.

Griffith, Jeff and Donna Ignatavicius. "Procedure Development: A Simplified Approach". The Journal of Nursing Administration. 14:27-31, September, 1984.

Grizzle, Grady. Research Methodology Seminar Handout. Ft. Lauderdale: Nova University, Programs for Higher Education. Fall, 1990.

Haimann, Theo. Supervisory Management for Health Care Organizations. Fourth Edition. St. Louis: The Catholic Health Association of The United States, 1989.

Hardy, Owen B. and R. Clayton McWhorter. Management Dimensions: New Challenges of the Mind. Rockville, MD: Aspen Systems Corporation, 1988.

Isaac, Stephen and William B. Michael. Handbook in Research and Evaluation: For Education and the Behavioral Sciences. Second Edition. San Diego: EdITS Publishers, 1981.

Leibler, Joan Grotto, Ruth Ellen Levine, and Hyman Leo Cervitz. Management Principles for Health Professionals. Rockville, MD: Aspen Systems Corporation, 1984.

Mark, Barbara A. and Howard L. Smith. Essentials of Finance in Nursing. Rockville, MD: Aspen Systems Corporation, 1987.

Nardecchia, Mary Ann and Michele T. Myers. "The Policy Manual: A Basis for Legal Protection". Nursing Administration Quarterly, 5:57-62. Fall, 1980.

Northrup, Cynthia E. and Mary E. Kelly. Legal Issues in Nursing. St. Louis: The C.V. Mosby Company, 1987.

Patterson, Carole H., Deborah Kranz, and Barbara Brandt. A Guide to JCAH Nursing Services Standards. Chicago: Joint Commission on Accreditation of Hospitals, 1986.

Rancho Santiago College. Student Demographics. Santa Ana, CA: Office of Institutional Research, 1991.

Rankin, Gary E. Research Methodology: A Study Guide for the Core Seminar. Ft. Lauderdale: Nova University, Programs for Higher Education. Fall, 1990.

Rebore, Ronald W. Personnel Administration in Education: A Management Approach. Third Edition. New Jersey: Prentice Hall, 1991.

Robinson, Valda and Philip L. Woolf. Guide to the Practicum Process. Ft. Lauderdale: Nova University, Programs for Higher Education. Revised July, 1991.

Rocereto, LaVerne R. and Cynthia M. Maleski. The Legal Dimensions of Nursing Practice. New York: Springer Publishing Company, 1982.

Rowland, Howard S. and Beatrice L. Rowland. Nursing Administration Handbook. Second Edition. Rockville, MD: Aspen Systems Corporation, 1985.

Rubenstein, Norton M. Handbook of Clinical Laboratory Management. Rockville, MD: Aspen Systems Corporation, 1986.

Scheyer, William L. Handbook of Health Care Material Management. Rockville, MD: Aspen Systems Corporation, 1985.

Schultz, Rockwell and Alton C. Johnson. Management of Hospitals and Health Services: Strategic Issues and Performance. St. Louis: The C.V. Mosby Company, 1990.

Sergiovanni, Thomas J. Handbook for Effective Department Leadership. Second Edition. Boston: Allyn and Bacon, Inc., 1984.

Steel, Jennifer Lynn. "What Manual?! Getting Policies and Procedures on the Line". Nursing Management, 18:43-46. March, 1982.

Swansburg, Russell C. Management and Leadership for Nurse Managers. Boston: Jones and Bartlett Publishers, 1990.

Swansburg, Russell C., Phillip W. Swansburg, and Richard J. Swansburg. The Nurse Manager's Guide to Financial Management. Rockville, MD: Aspen Publishers, Inc., 1988.

Tappen, Ruth M. Nursing Leadership: Concepts and Practice. Philadelphia: F.A. Davis Company, 1986.

Treece, Eleanor Walters and James William Treece, Jr. Elements of Research in Nursing. Third Edition. St. Louis: The C.V. Mosby Company, 1987.

Vose, Donna. "Revising the Policy and Procedure Manual". Nursing Outlook. 38:104, March-April, 1990.

Wolotkiewicz, Rita J. College Administrator's Handbook. Boston: Allyn and Bacon, Inc., 1980.

Wolper, Lawrence F. and Jesus J. Pena. Health Care Administration: Principles and Practices. Rockville, MD: Aspen Systems Corporation, 1987.

APPENDIX

THE PRODUCT DEVELOPED

Rancho Santiago College
Health Services

POLICY AND PROCEDURE MANUAL
TABLE OF CONTENTS

PART ONE: GENERAL POLICIES

1. Index
2. Mission statement
3. Philosophy statement
4. Job descriptions
   - 4.1. Fulltime positions
     - 4.1.1. Coordinator
     - 4.1.2. H. S. Nurse
     - 4.1.3. Administrative clerk
   - 4.2. Parttime positions
     - 4.2.1. College nurse
     - 4.2.2. Intermediate clerk
     - 4.2.3. College physician
     - 4.2.4. College psychologist
5. Personnel policies
   - 5.1. absenteeism
   - 5.2. dress code
   - 5.3. licensed personnel
     - 5.3.1. license renewal
     - 5.3.2. CPR certification
   - 5.4. name tag
   - 5.5 tardiness
6. Health policies, district
   - 6.1. AIDS-HIV
   - 6.2. child abuse, reporting
   - 6.3. elder abuse, reporting
   - 6.4. rape
   - 6.5. sexual assault
   - 6.6. substance abuse
7. Abbreviations, list of
8. Keys, issuance of

PART TWO: GENERAL FORMS

1. audio-visual tapes
   - 1.1. check-out
   - 1.2. check-in
2. authorization for release of medical information

3. chart forms
   - 3.1. history and physical
   - 3.2. initial assessment
   - 3.3. progress notes
   - 3.4. lab results
   - 3.5. prescriptions
   - 3.6. x-ray reports
   - 3.7. sale of birth control pills
   - 3.8. lab receipts

4. class excused absence
5. consents
   - 5.1. treatment
   - 5.2. minors

6. injury, report of
   - 6.1. student
   - 6.2. employee
   - 6.3. visitor

7. insurance claim
8. immunizations
9. laboratory tests
10. letters, form
    - 10.1. no show appointments
    - 10.2. canceled appointments
    - 10.3. bad/bounced check
    - 10.4. money owed

11. loan of equipment
12. pap test
13. patient sign-in sheets
14. return to class release
15. statistical tally sheets
    - 15.1. daily summary
    - 15.2. weekly summary
    - 15.3. monthly summary

16. subpena of records
17. TB skin testing
18. worker's comp injury
    - 18.1. employee
    - 18.2. student worker

PART THREE: NURSING

1. general duties
   - 1.1. cleaning duties
     - 1.1.1. daily
     - 1.1.2. weekly
     - 1.1.3. monthly
     - 1.1.4 annual

1.2. closing procedure
1.3. opening procedure
1.4. shift routines
1.4.1. morning shift
1.4.2. afternoon shift
1.4.3. evening shift
2. clinical nursing procedures
2.1. anaphylactic reaction
2.2 ambulance transport
2.3. injections
2.3.1. immunizations
2.3.2. tetanus (DPT)
2.3.3. TB skin test
2.4. injury protocol
2.5. laboratory tests
2.5.1. blood withdrawal
2.5.2. glucose
2.5.3. pregnancy
2.5.4. stool specimen
2.5.5. throat culture
2.5.6. urine glucose
2.5.7. urine culture
2.6. medical emergency protocol
2.7. paramedic dispatch
2.8. room set-up
2.8.1. pelvic exam
2.8.2. pap smear
2.8.3. eye/er exam
2.8.4. suturing
2.8.5. injury
2.8.6. physical exam
2.9. sterilization of instruments
2.9.1. cold
2.9.2. autoclave
2.10. protocols for
2.10.1. cold
2.10.2. flu
2.10.3. sore throat
2.10.4. sprains
2.10.4.1 wrist
2.10.4.2 ankle
2.10.5. fractures
2.10.6. burns
2.10.6.1. minor
2.10.6.2. major
2.10.7. lacerations
2.10.8. GI upset
2.10.9. URI

3. crisis intervention team
4. disposal of soiled dressings
5. equipment, maintenance of
   - 5.1. autoclave
   - 5.2. glucometer
   - 5.3. microscope
   - 5.4. otoscope
   - 5.5. ophthalmoscope
   - 5.6. suction machine
6. emergency cart supplies
7. first-aid kit supplies
8. medication dispensing
   - 8.1 OTC
   - 8.2. prescription
9. oxygen, administration of
   - 9.1. mask
   - 9.2. nasal cannula
10. stock medication, list of
11. walkie-talkie
    - 11.1. sign-on
    - 11.2. sign-off

PART FOUR: CLERICAL

1. General duties
   - 1.1. closing duties
   - 1.2. collection of money
     - 1.2.2. lab
     - 1.2.2. procedures
     - 1.2.3. condoms
   - 1.3. complaints
   - 1.4. daily appointment list
   - 1.5. first-aid kits
     - 1.5.1. check-out
     - 1.5.2. check-in
   - 1.6. supplies
   - 1.7. telephone technique
     - 1.7.1. voice mail retrieval
     - 1.7.2. recording a message
2. shift routines
   - 2.1. morning shift
   - 2.2. afternoon shift
   - 2.3. evening shift
3. computer
   - 3.1. log-on
   - 3.2. log-off

PART FIVE: STANDING ORDERS

1. anaphylaxis, epinephrine
2. cholesterol test
3. ear lavage
4. fitness class students, lab tests
5. glucose test
6. immunizations (MMR)
7. pregnancy test
8. pre-nursing students, lab tests
9. pre-paramedic students, lab tests
10. stool test, guaiac
11. tetanus
12. TB skin test
13. throat culture